

15915 U.S. PRO  
07/08/03

Atty. Dkt. No. 085747-0245

15915 U.S. PRO  
10/614344  
07/08/03

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Linda D. Artman et al.

Title: TREATING A VARIETY OF PATHOLOGICAL CONDITIONS,  
INCLUDING SPASTICITY AND CONVULSIONS, BY EFFECTING  
A MODULATION OF CNS ACTIVITY WITH ISOVALERAMIDE,  
ISOVALERIC ACID, OR A RELATED COMPOUND

Prior Appl. No.: 09/258,882

Appl. No.: Unassigned

Prior Appl. Filing Date: 03/01/1999

Filing Date: 07/08/2003

Examiner: Shep ROSE

Art Unit: 1614

**CONTINUING PATENT APPLICATION**  
**TRANSMITTAL LETTER**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☐ Continuation ☒ Division ☐ Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ Application Data Sheet (37 CFR 1.76) (4 pages).

☒ Preliminary Amendment (3 pages).

☒ Specification, Claims, and Abstract (52 pages).

☒ Formal drawings (7 sheets, Figures 1a-1b and 2-6).

☒ Declaration and Power of Attorney (2 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	32	- 20	= 12	x \$18.00	= \$216.00
Independents:	3	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late payment of filing fee				+ \$130.00	= \$130.00
				SUBTOTAL:	= \$1096.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):				=	\$0.00
				TOTAL FILING FEE:	= \$1,096.00

- ☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.
- ☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 8 July 2003By S. A. Bent

FOLEY & LARDNER  
Customer Number: 22428



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